



# 2008—2009 YMCA's School's Out Fun Club Registration Form



Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_ Y Member Y/N Exp Date \_\_\_\_\_

I am registering my camper for School's Out Fun Club for the days marked below. I understand that the balance of the daily fee is due when the child is dropped off for that day and after that all payments are considered late. I understand that written notice of cancellation must be given 48 hours in advance if I do not want to be billed for the days my child is registered for and not attending. I understand immunization records and a health physical are due to the office prior to enrollment. By signing I agree to pay an additional **\$10 per week fee for all late payments.** Both sides of this registration form must be completed.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

## YMCA School's Out Fun Club (Full Day)

**\*Ages 5-15 6:45am-6:00pm**

**Y Members \$16 Non-Member \$25**

\_\_\_\_\_ October 20, 2008  
 \_\_\_\_\_ January 2, 2009  
 \_\_\_\_\_ March 6, 2009  
 \_\_\_\_\_ April 10, 2009  
 \_\_\_\_\_ ~~May 25, 2009~~ Y Closed Memorial Day

## YMCA Christmas Camp

**\*Ages 5-15 6:45am-6:00pm**

**Y Members \$16 Non-Member \$25**

\_\_\_\_\_ December 22, 2008  
 \_\_\_\_\_ December 23, 2008  
 \_\_\_\_\_ December 24 & 31 2008 6:45-3:00pm  
 \_\_\_\_\_ December 26, 2008  
 \_\_\_\_\_ December 29, 2008  
 \_\_\_\_\_ December 30, 2008

## YMCA School's Out Fun Club (Half Day)

**\*Ages 5-15 12:00pm-6:00pm**

**Y Members \$10 Non-Member \$20**

\_\_\_\_\_ September 2, 2008  
 \_\_\_\_\_ November 14, 2008  
 \_\_\_\_\_ November 24, 2008  
 \_\_\_\_\_ November 25, 2008  
 \_\_\_\_\_ March 5, 2009  
 \_\_\_\_\_ March 27, 2009  
 \_\_\_\_\_ June 10, 2009  
 \_\_\_\_\_ June 11, 2009  
 \_\_\_\_\_ June 12, 2009

## YMCA Spring Break Camp

**\*Ages 5-15 6:45am-6:00pm**

**Y Members \$16 Non-Member \$25**

\_\_\_\_\_ March 30, 2009  
 \_\_\_\_\_ March 31, 2009  
 \_\_\_\_\_ April 1, 2009  
 \_\_\_\_\_ April 2, 2009  
 \_\_\_\_\_ April 3, 2009

If there are any questions please feel free to contact Molly by calling 933-YMCA. Please feel free to visit our website at [www.gtbayymca.org](http://www.gtbayymca.org) or come in for a personal visit.

For office use only: Date Received \_\_\_\_\_

Total Amount Due \_\_\_\_\_ Total Deposits Due (\$5/day) \_\_\_\_\_ Amount Rec'd \_\_\_\_\_ Balance due \_\_\_\_\_

Method of payment: cash \_\_\_\_\_ check# \_\_\_\_\_ VISA/MC# \_\_\_\_\_ Expiration date \_\_\_\_\_

**PLEASE MAKE SURE BOTH SIDES OF REGISTRATION FORM ARE COMPLETE**

**\*Per our license, children who are attending school from ages 5 to 15 years are allowed to register.  
 Children must be within this range the day of the program.\***

## GRAND TRAVERSE BAY YMCA Official Registration Form, Release and Waiver of Liability and Indemnity Agreement

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

In further consideration of being permitted to enter the YMCA for any purpose including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned hereby agrees to the following:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the YMCA and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releases") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releases or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any, loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releases or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releases or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

The undersigned gives permission to the Grand Traverse Bay YMCA for this registrant to appear in photographs, videotapes, or other media, etc., associated with YMCA programs. PARENTS: Our staff is trained in child abuse prevention and all staff sign a code of conduct. Please report any suspicious activity immediately. The undersigned agrees to abide by the Program Refund Policy as stated in the YMCA quarterly Program Brochure. Refunds will be made in the form of program credits unless otherwise approved and requests for refunds must be made in writing prior to the program start date. Late fees are non-refundable.

The Grand Traverse Bay YMCA is founded on Christian principles and values and prohibits inappropriate behavior, conduct, and materials. This includes, but is not limited to, profanity or abusive language, attire, smoking, use of alcohol or drugs, weapons, fireworks, pornography, the removal or misuse of YMCA property, or criminal conduct of any type. Such inappropriate behavior, conduct, or materials is unacceptable and the YMCA consequently retains the right to deny memberships and program participation to its applicants and to revoke a membership of any current member or participant at its sole discretion. Pets are not allowed at YMCA facilities or off-site program locations. All program participants, guests, and members who are minors are not allowed to leave YMCA property unless accompanied by a relative or pre-authorized guardian. Some programs require personal equipment not supplied by the YMCA. Further, the undersigned will at all times display the YMCA values of Honesty, Respect, Caring, and Responsibility and encourage the efforts of all players, coaches, spectators and referees in a positive manner. The undersigned understands the Y mission in offering this program: *to build strong kids, strong families, and strong communities.*

YMCA PROGRAMS ARE NOT SPONSORED BY OR ASSOCIATED WITH T.C.A.P.S.

Program Title: School's Out Fun Club Session #: \_\_\_\_\_ Day/Time: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Circle one of each: Male / Female Member / Non-Member

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Special Needs or Health Concerns (include medications): \_\_\_\_\_

I will volunteer to help with this program (please specify how): \_\_\_\_\_

Circle if you require scholarship assistance: YES / NO (Additional form required. Requests for aid must be made 3 weeks prior to program start date. )

Special Requests: \_\_\_\_\_ Participant T-Shirt Size: \_\_\_\_\_

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Michigan and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ, UNDERSTOOD AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

Date: \_\_\_\_\_

Signature of Applicant/Parent: \_\_\_\_\_

Signature of other Adult: \_\_\_\_\_

Signature of Child in Program: \_\_\_\_\_

**PLEASE MAKE SURE BOTH SIDES OF REGISTRATION FORM ARE COMPLETE**